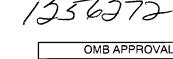
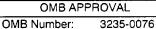
### FORM D



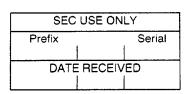




Expires: May 31, 2005

Estimated Average burden hours

per form . . . . . . 16.00





NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

FORM D

Filing Under (Check box(es) that apply):	☐ Rule 504 ☐	Rule 505	Rule 506	Section 4(6)	ULOE
Type of Filing: X New Filing	☐ Amendment				PROCESSEU
		SIC IDENTI	FICATION DATA		0 2002
1. Enter the information requested about the	issuer				1 SEP 08 2003
Name of Issuer ( check if this is an a Vestis Diversified, LP	amendment and name has	changed, and	indicate change.)		THOMSON FINANCIAL
Address of Executive Offices 116 Village Boulevard, Suite 200, Princeto	`	and Street, Cit	y, State, Zip Code)	Telephone Number (In (609) 524-4046	ocluding Area Code)
Address of Principal Business Operations (if different from Executive Offices)	(Number	and Street, Cit	y, State, Zip Code)	Telephone Number (In	cluding Area Code)
Brief Description of Business  To operate as a private investment limited	partnership.				
Type of Business Organization					
☐ corporation	★ limited partnership,	already forme	d	other (please:spe	cify): (Enterior Control of Contr
business trust	☐ limited partnership,	to be formed		ll op	PACNA
Actual or Estimated Date of Incorporation or	Organization:	Month 0 3		Actual     Actual     Actual	stimated
Jurisdiction of Incorporation or Organization	: (Enter One-letter U.S. Pe CN for Canada; FN fo				D E

## GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

			TIFICATION DATA		
	ion requested for the f	-	ar		
		er has been organized within the			
			e vote or disposition of, 10% or		
		•	te general and managing partner	s of partnership issu	ers; and
	managing partner of p				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General Partner
Full Name (Last name first, if	individual)				
Tapestry Asset Managemen		0' 0 1)		· <del></del>	
Business or Residence Addres	ss (Number and Stre	et, City, State, Zip Code)			
116 Village Boulevard, Suite	200, Princeton, Nev	v Jersey 08540			<u>-</u>
Check Box(es) that Apply:	× Promoter	Beneficial Owner of the G.P.	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Qadeer, Afroz					
Business or Residence Addres	ss (Number and Stre	et, City, State, Zip Code)			
116 Village Boulevard, Suite	e 200, Princeton, Nev	v Jersey 08540			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				5
Business or Residence Addres	ss (Number and Stre	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or  Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	ss (Number and Stre	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				Managing Farther
Business or Residence Address	ss (Number and Stre	et, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first, if	individual)				Managing Partner
Business or Residence Addre	ss (Number and Stre	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)		-		managing 1 armer
Business or Residence Addre	ss (Number and Stre	eet, City, State, Zip Code)			
	(Use	blank sheet, or copy and use ad	ditional copies of this sheet, as	necessary.)	

_					В.	INFORM	IATION .	ABOUT (	FFERIN	G				<del></del>	
														Yes	No
1.	Has the issue	r sold, or do	es the issue	er intend to										Ш	$\boxtimes$
								umn 2, if fi							
2.	What is the m * (GP may a	ccept lesser	amounts)											Yes	1,000,000 No
3.	Does the offe	ring permit	joint owner	ship of a si	ngle unit?	••••••	•••••		•••••				••••	X	
4.	Enter the infremuneration agent of a broto be listed ar	formation in for solicitate the formation for solicitate the formation for the formation for the formation in the formation i	equested fo tion of pure er registere	or each per chasers in o d with the S	rson who connection SEC and/or	has been o with sales o with a stat	or will be of securitie e or states,	paid or gives in the offer list the nar	ven, directlering. If a property and the broaden are of the broaden ar	y or indire person to b oker or dea	etly, any o e listed is a der. If mor	commission in associate	or similar d person or	-	
Ful	l Name (Last na	me first, if	individual)					<u> </u>							
_	lone														
Bus	siness or Reside	nce Addres	s (Number :	and Street,	City State,	Zip Code)	_								
Nar	me of Associate	d Broker or	Dealer												
Sta	tes in Which Pe	rson Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	s						- <del> </del>		
	(Check "A	ll States" o	r check indi	vidual Stat	es)									All S	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	{CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
	l Name (Last na		,	and Street,	City State,	Zip Code)				· · · · · · · · · · · · · · · · · · ·	-				
Nar	me of Associate	d Broker or	Dealer				······································								,
Sta	tes in Which Pe	rson Listed	Has Solicit	ed or Intend	ds to Solici	t Purchaser	S	<del></del>							
	(Check "A	ll States" o	r check indi	vidual Stat	es)	•••••								All S	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Ful	l Name (Last na	me first, if	individual)												
Bus	siness or Reside	nce Addres	s (Number	and Street,	City State,	Zip Code)									
Nai	me of Associate	d Broker or	Dealer												
Sta	tes in Which Pe	rson Listed	Has Solicit	ed or Inten	ds to Solici	t Purchaser	· · · · · · · · · · · · · · · · · · ·	··							
			r check indi			Grenasti	-							A 11 G	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	AJI S	States
	[IL] [MT] [RI]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of securities offered for exchange and already exchanged.				
	Type of Security	Aggregate Offering Price		Amo	unt Already Sold
	Debt	\$	:	S	
	Equity				
	☐ Common ☐ Preferred			-	
	Convertible Securities (including warrants)	5		s	
	Partnership Interests	<u> 100,000,000</u>		S	6,450,000
	Other (Specify:	S	:	s	
	Total	<u> 100,000,000</u>	:	\$	6,450,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Doll	ggregate lar Amount Purchases
	Accredited Investors	5		s	6,450,000
	Non-accredited Investors				N/A
	Total (for filings under Rule 504 only)				N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			D-11	ar Amount
	Type of offering	Type of Security		ווטכו	Sold
	Rule 505	N/A		\$	N/A
	Regulation A	N/A	:	\$	N/A
	Rule 504	N/A	:	s	
	Total	<u>N/A</u>		\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			s	0
	Printing and Engraving Costs	X		s	1,000
	Legal Fees.	X		\$	20,000
	Accounting Fees	X	l	s	8,000
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify): Blue sky	<u>X</u>		\$	1,000
	Total	X		\$	30,000

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$_		99,970,000
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.				
		Payments to		
		Officers, Directors, and		Payments
		Affiliates		to Others
Salaries and fees	X	\$(	<u>1)</u> [	□ s
Purchase of real estate		\$	_ {	s
Purchase, rental or leasing and installation of machinery and equipment		\$	[	□ \$
Construction or leasing of plant buildings and facilities.		\$	_ [	] \$
Acquisition of other businesses (including the value of securities involved in this offering that			Г	7.
may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$		
Repayment of indebtedness		\$		s
Working capital		\$	[	\$
Other (specify):securities investments		\$	_	X \$ <u>99,970,</u> 0
Column Totals	X	\$(	1)	× \$99,970.
Total Payments Listed (column totals added)		☒ \$	9	9,970,000
The General Partner of the Issuer will be entitled to receive management fees at an annual rate of 1% of the capital account balance of each Limited Partner.				
D. FEDERAL SIGNATURE		<u>,</u>		

ATTENTION

By: Managing Member of Tapestry Asset Management, LLC, general partner of Issuer

Date

August 28, 2003

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Signature

Title of Signer (Print or Type)

Issuer (Print or Type)

Afroz Qadeer

Vestis Diversified, LP

Name of Signer (Print or Type)

_	E.	TATE S	SIGNATU	JRE				
							Yes	No
1.	. Is any party described in 17 CFR-230.262 presently subject to any of	he disqua	alification p	rovisions of	such rule?		<del></del>	
	See Appendix, Colu	ı <del>n 5, for st</del>	late response	Not Appli	cable		•	
2.	. The undersigned issuer hereby undertakes to furnish to any state adm such times as required by state law.	inistrator	of any state	e in which th	his notice is	filed, a notice on For	m D (17 CFR 23	39.500) at
3.	. The undersigned issuer hereby undertakes to furnish to the state adm	nistrators,	, upon writt	en request, i	information	furnished by the issue	er to offerees.	
4.	. The undersigned issuer represents that the issuer is familiar with the (ULOE) of the state in which this notice is filed and understands the these conditions have been satisfied. Not Applicable							•
	The issuer has read this notification and knows the contents to be true and the erson.	nas duly c	caused this	notice to be	signed on its	s behalf by the unders	igned duly autho	orized
Isst	ssuer (Print or Type) Signature					Date		
Ves	estis Diversified, LP	/_	راكر			August 28,	2003	
Nar	Name (Print or Type) Title (Print or T	pe) -						

By: Managing Member of Tapestry Asset Management, LLC, general partner of Issuer

#### Instruction:

Afroz Qadeer

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				API	PENDIX					
1		2	3		5					
	to non-a	d to sell accredited rs in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA	-	X	\$100,000,000	1	\$250,000	0	0	N/A	N/A	
со		X	\$100,000,000	1	\$100,000	0	0	N/A	N/A	
CT										
DE										
DC										
FL_										
GA										
н										
ID										
IL		-					1			
IN		<u> </u>								
IA								w <del></del>		
KS										
KY_										
LA		+								
ME		-	-							
MD									<del> </del>	
MA									<del> </del>	
MI	-		-							
MN										
MS MO	<del>                                     </del>									
MO MT										
NE										
NV										
NH										

				API	PENDIX				<del></del>		
1		2	3		5						
	to non-a	d to sell accredited as in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
NJ											
NM											
NY		X	\$100,000,000	3	\$6,100,000	0	0	N/A	N/A		
NC											
ND											
ОН											
ок											
OR											
PA											
RI											
SC		-									
SD	7										
TN											
TX											
UT VT											
VA											
WA											
WV											
WI											
WY											
PR											